



A Presentation to the Study Commission on Maine's Hospitals

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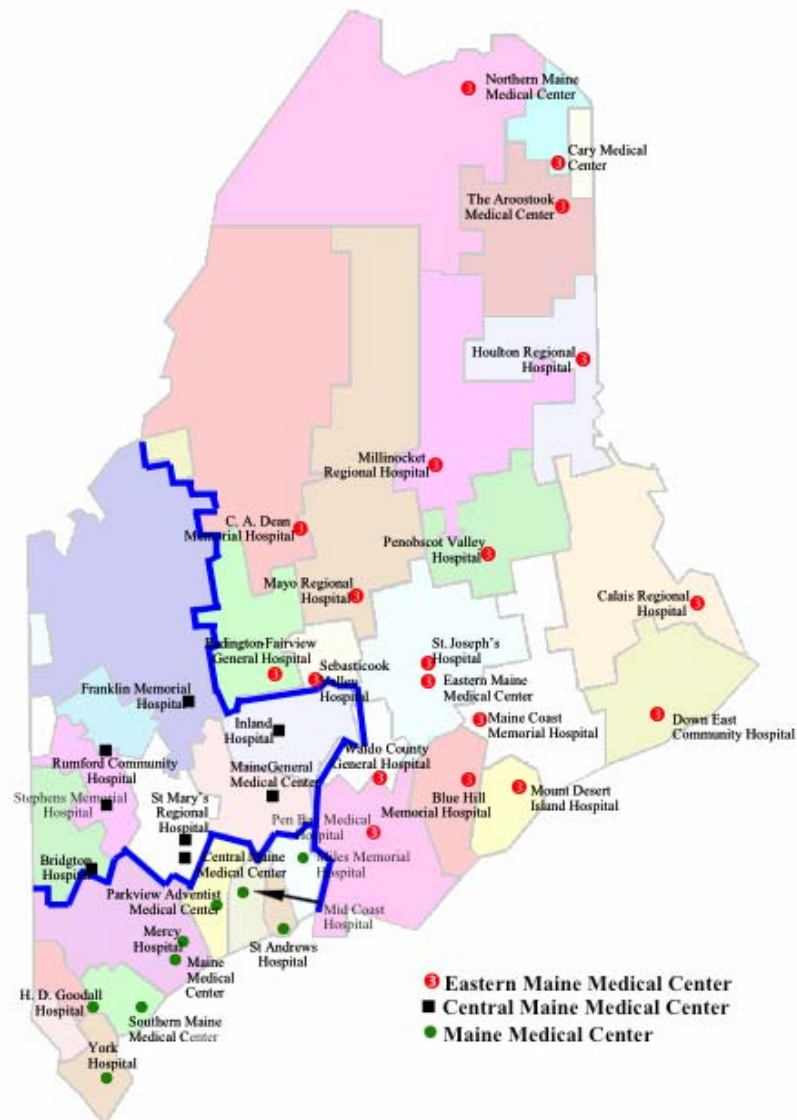
CMH Vision and Philosophy

- Uncompromising pursuit of excellence
- Quality care, close to home
 - Every patient deserves the highest quality of care regardless of where they live in Maine
 - Care should be delivered in local communities, whenever possible, consistent with the highest quality standards and fiscal responsibility

OVERVIEW

- Hospitals
- Physicians
- Services
- Volume

**Figure 2. Hospitals by Regional Resource Center Catchment Areaa
And Hospital Service Area, Maine, 2003***



*Does not include Veterans Administration (VA) Medical Center nor Mental Health Institutions



Hospitals

- Central Maine Medical Center - Lewiston
 - 250 beds
 - Tertiary hospital
- Bridgton Hospital - Bridgton
 - 25 beds
 - New facility
- Rumford Hospital - Rumford
 - 25 beds
 - Critical Access Hospital



Physician Network

- Lewiston/Auburn
- Mechanic Falls
- Poland
- Lisbon
- Gray
- Rumford
- Dixfield
- Naples
- Bridgton
- Fyreburch
- Private practice physicians in other communities



Comprehensive Scope of Clinical Services

- Central Maine Heart and Vascular Institute: prevention, outreach, diagnostics, cardiac surgery, valve surgery, angioplasty, minimally-invasive thoracic surgery, rehabilitation and research
- Cancer: Medical, Surgical and Radiation Oncology
- Trauma Center
- Critical Care staffed by intensivists
- Women's Health: Maternity, NICU, Infertility, Breast Center, Osteoporosis; Pediatrics
- Medical and Surgical sub-specialties
- Professional Education
- Community Health and Wellness



Professional Education

- Family Practice Residency Program and Rural Track
- CMMC School of Nursing with satellite campuses in Mexico and Farmington
- CMMC School of Radiology and Nuclear Medicine
- Clinical Pastoral Education Program



Community Health and Wellness

- ScoreKeeper
- CMHVI Van
- Women's Heart Advantage
- Community Health Fairs
- Flu Shot Clinics
- Community Education programs



Summary Statistics

- 11,000 Discharges
- 350,000 Outpatient visits
- 69,000 Emergency Department Visits
- 950 births
- Among the largest employers in the communities where our hospitals are located



Principles of CMH Integration Strategy

- Continued Quality Improvement
- Customer Focused
- Access
- Efficiency and Productivity
- Innovation
- Financial Strength
- Sameness



Continued Quality Improvement

- Quality Initiatives
 - Maine Business Coalition
 - Monitoring MI and CHF protocols
 - CMHVI quality standards, door to balloon time, outcomes, etc.
 - Quality information on posted on website
 - Inpatient and Outpatient Electronic Medical Record
 - Hospitalist Program
 - PHO Initiatives
 - Diabetes
 - Asthma
 - Coumadin management
 - ED guidelines for lower back pain
 - Telemedicine – diabetic ed/CME
 - CMHVI van



Customer Focused

- CMMC Press Ganey Customer Satisfaction Scores (First Quarter 2004):
 - Physicians and Nurses – 99
 - Overall Hospitals – 98



Access

- Physician specialty clinics – BH, RH, FMH:
 - Cancer
 - Cardiac
 - Orthopedics
 - GI
 - Pulmonary
 - ENT
- Primary Care Network



Efficiency and Productivity

- Physical plant design impact on operating cost – e.g., BH, RH, CMMC
- Consolidation of back room and support services
 - Examples, IT, Patient Financial Services (billing and collections), Materials Management, Human Resources, Finance and Budgeting, Biomedical Engineering, Insurance and Risk Management, Compliance, Legal, Phone System, Physician Recruitment
- Sharing of clinical personnel and management resources to reduce administrative overhead
 - CEO – CMH and CMMC
 - CMH VP's – multiple system-wide responsibilities
 - Share Managers – Lab/Radiology at RH and BH with support from CMMC
 - Reductions in VPs and middle managers
 - ED Staffing – One physician group staffs four hospitals
 - Medical Staff Clinical Coordinating Committee



Innovation

- CMHVI – Model (Single Stay, MD Staffing, family focus, Arbor House)
- ScoreKeeper
- LifeFlight of Maine



Financial Strength

- Five Year Strategic Financial Plan
 - Operating
 - Capital

- Benchmarks Moody's A Rated hospital
 - Operating margin
 - Days Cash on Hand
 - Debt to Total Capitalization
 - Debt Service Coverage
 - Cash to Debt

- "Best Practices" for Cost Control



Sameness

- How our patients perceive the care they receive
- Clinical sameness in policies and procedures
 - Staff flexibility
 - Risk management



Challenges

- Insufficient Medicare and Medicaid reimbursement
- Labor shortages create inflationary cost pressures
- Capital resources:
 - IT
 - New medical technology
 - Routine capital and physical plant replacement



Benefits of Regionalization

- Avoid unnecessary duplication of services
- Improve quality – volume and standard protocols
- Collaboration has the potential to reduce cost through economies of scale
- Items listed on pages 4 and 5 of the “Cooperation, Collaboration, Affiliation and Consolidation” paper



Challenges of Regionalization

- Results will be commensurate with the commitment to collaboration and consolidation
- Caution that it takes time to see results
- Real and perceived legal barriers



SUMMARY



Quality



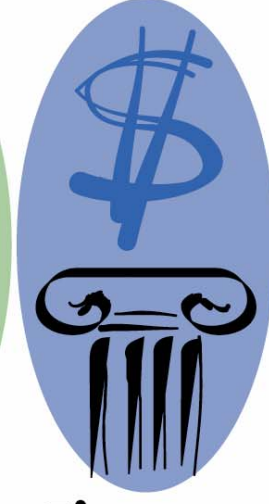
**Customer
Service**



People



Growth



Finance